

EXHIBIT I

**UNITED STATE DISTRICT COURT
EASTERN DISTRICT OF WISCONSIN
GREEN BAY DIVISION**

DANIEL MCGRAW, and
SUSAN MCGRAW,

Plaintiffs,

v.

SUPERIOR AVIATION, LTD.,
KUBICK AVIATION SERVICES, INC.,
And QBE INSURANCE CORP.,

Defendants.

Civil Action: 1:15-CV-1424-WCG

**SUPERIOR AVIATION AND QBE
INSURANCE CORPS' FIRST SET OF
WRITTEN INTERROGATORIES AND
DOCUMENT REQUESTS TO THE
PLAINTIFF, DANIEL MCGRAW**

Pursuant to Fed. R. Civ. P. 33 and 34, within 30 days, the Defendants Superior Aviation LTD., and QBE Insurance Corp. hereby requests the Plaintiff, Daniel McGraw, answer the following written interrogatories and produce all of the documents and other things as described below:

INSTRUCTIONS & DEFINITIONS

Each of the following interrogatories shall be answered separately and fully, in writing, under oath, unless objected to and in which event the objection shall be stated in lieu of an answer. The answers, including objections, shall be signed by the party, officer or agent making them. The party upon whom the interrogatories and requests for the production of documents have been served shall serve a copy of the answers and objections within thirty (30) days hereafter, in accordance with Fed. R. Civ. P. 33 and 34. An evasive or incomplete answer is considered a failure to respond.

You are under a continuing duty to reasonably supplement your responses with respect to any questions directly addressed to the matter, and the identity of each person expected to be

called as a witness. Furthermore, you are under a similar duty to correct any incorrect responses when you learn it is incorrect.

A. The term “You”, “Your” or “Yourself” shall mean or refer to the Plaintiff **Daniel McGraw** and where appropriate, his consultants, agents, subagents, attorneys and any person or entity acting or purporting to act on her behalf.

B. The term “Document(s)” shall mean any written, graphic or recorded material of every kind and description, however produced or reproduced, whether a draft or final, original or reproduction, signed or unsigned, regardless of whether approved, signed, sent, received, drafted or executed, that is in the possession, custody or control of **Daniel McGraw** or any of his agents, employees, officers, attorneys or any other person acting or purporting to act on his behalf.

C. The term “Person” shall mean any natural person, corporation, partnership, association, joint venture and other business association, governmental or public body and/or other legal entities.

D. The term “Communication” shall mean any and all forms of verbal or written intercourse.

E. The term “Relating to” shall mean consist of, refer to, reflect or be in any way, legally, logically, or factually connected with the matter discussed.

F. Whenever appropriate, the singular form of a word should be interpreted in plural. “And” as well as “or” shall be construed either disjunctively or conjunctively as necessary to bring within the scope of this request any document which might otherwise be construed to be outside of its scope. The past tense shall be construed to include the present tense and vice versa, to make the request inclusive rather than exclusive.

G. The term the "Occurrence" or "Incident" refers to the accident involving your aircraft, N246AK, which occurred on May 6, 2014 that is the subject matter of Your Complaint.

H. The term "Defendant" shall mean Superior Aviation and/or QBE Insurance Corp.,

I. The term "Lawsuit" or "Complaint" refers to the above captioned lawsuit filed by Plaintiff which is pending in the Eastern District of Wisconsin.

J. If You contend that You are entitled to withhold from production any or all information or documents requested herein on the basis of the attorney-client privilege, the work product doctrine or any other ground, please provide a written statement with respect to each and every Document setting forth:

- (i) the nature of the Document or information, *e.g.*, letter or memorandum;
- (ii) the date appearing on the Document or, if no date appears, the date on which the document was prepared;
- (iii) the name of the Person(s) by whom the Document was written or prepared;
- (iv) the name of the Person(s) to whom the Document was addressed;
- (v) the name of each Person, other than the addressee(s) identified above, to whom the Document, or a copy thereof, was sent or with whom the Document was discussed;
- (vi) the name of the Person who signed the Document, if signed;
- (vii) a description of the subject matter of the Document;
- (viii) the name of the Person who has custody of the Document;
and
- (ix) the basis upon which You contend You are entitled to withhold the Document from production.

INTERROGATORIES

Interrogatory No. 1: Identify the person answering these interrogatories, including Your full name (including any middle names), any aliases by which you have been known, address, date of birth and social security number, and any person(s) or entity with whom You have consulted in the preparation of Your answers to these Interrogatories.

Interrogatory No. 2: Identify each and every person whom you believe has knowledge or information relating to any of your claimed damages or injuries allegedly suffered as a result of the incident that is the subject matter of this case.

Interrogatory No. 3: Identify each and every maintenance facility, and/or mechanic, FAA certified or otherwise, which has either performed maintenance or inspections on your aircraft, N246AK, during your ownership.

Interrogatory No. 4: For each mechanic or maintenance facility identified in response to Interrogatory No. 3, to the best of your ability, state when they performed maintenance and/or inspections, and what maintenance and/or inspections were performed.

Interrogatory No. 5: If you have personally performed any maintenance or inspection on your aircraft, N246AK, please state when and what maintenance and/or inspections you performed.

Interrogatory No. 6: After your aircraft, N246AK, came out of its condition inspection on February 7, 2014, identify each and every time you are aware that its engine was started, run, attempted to run, or otherwise operated.

Interrogatory No. 7: Identify each and every fact upon which you rely in Paragraph 21 of your Complaint to assert that Superior Aviation performed an inadequate condition inspection.

Interrogatory No. 8: Identify each and every fact upon which you rely in Paragraph 22 of your Complaint to assert that Superior Aviation failed to exercise ordinary care in performing maintenance and/or a condition inspection on your aircraft, N246AK.

Interrogatory No. 9: Identify each and every fact upon which you rely in Paragraph 22 of your Complaint to assert that Superior Aviation failed to adequately inspect and repair your aircraft, N246AK.

Interrogatory No. 10: Identify each and every fact upon which you rely in Paragraph 22 of your Complaint to assert that Superior Aviation failed to follow Lanciar's condition inspection checklist when performing a condition inspection on your aircraft, N246AK.

Interrogatory No. 11: Identify each and every fact upon which you rely in Paragraph 22 of your Complaint to assert that Superior Aviation failed to exercise ordinary care in inspecting for line hose and clamp leaks on your aircraft, N246AK.

Interrogatory No. 12: Identify each and every fact upon which you rely in Paragraph 22 of your Complaint to assert that Superior Aviation failed to refrain from acts or omissions in conducting its business so as to expose you to an unreasonable risk of bodily injury or death.

Interrogatory No. 13: Identify each and every document upon which you will rely in support of your responses to Interrogatories 7 through 13.

Interrogatory No. 14: Identify each and every fact upon which you rely in Paragraph 26 of your Complaint to assert that Superior Aviation acted maliciously or in intentional disregard of plaintiff's rights so as to warrant the imposition of punitive damages under Wis. Stat. sec. 895.043.

Interrogatory No. 15: In your own words, please describe the injuries you allegedly suffered as a result of the subject incident.

Interrogatory No. 16: If you contend any of the injuries described in Paragraph 15 are permanent in nature, please identify which injuries you allege are permanent and how they effect your daily living.

Interrogatory No. 17: State the name and address of each doctor, health care provider, or health care facility, including psychologists, psychiatrists, social workers, or counselors, from which you sought or are currently seeking treatment including the dates of treatment and the type of treatment sought.

DOCUMENT REQUEST

Request No. 1: Produce any and all records in your possession upon which you will rely to support you alleged damages.

Request No. 2: Produce any and all documents identified and/or relied up in responding to the above Interrogatories.

Request No. 3: Produce any and all logbooks in your possession for you aircraft, N246AK, including, but not limited to, airframe logbooks, engine logbooks, and/or propeller logbooks.

Request No. 4: Produce any and all maintenance records in your possession relating to your aircraft, N246AK, for the ten (10) years prior to the alleged incident that is the subject matter of this case.

Request No. 5: Produce your aircraft, N246AK's, Pilot's Operating Handbook, Airplane Flight Manual, or their equivalent.

Request No. 6: Produce any and all checklists in your possession that relate to the operation and/or maintenance of your aircraft, N246AK.

Request No. 7: Produce any and all documents in your possession that relate to your aircraft, N246AK's, emergency procedures.

Request No. 8: Produce any and all documents in your possession relating to build and/or manufacturing of the aircraft and the issuance of its special airworthiness certification.

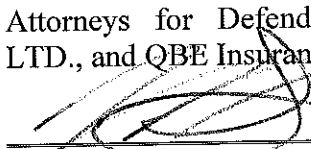
Request No. 9: Produce your pilot's Logbook.

Request No. 10: Produce signed copies of the attached 15 blank medical authorizations and please fill in your date of birth and social security number on each.

Request No. 11: Produce any and all documents referenced in your Rule 26(a)(1) Initial Disclosures.

Dated this 17th day of March, 2016.

**WILSON ELSER MOSKOWITZ EDELMAN
& DICKER LLP**
Attorneys for Defendants Superior Aviation,
LTD., and QBE Insurance Corp.



William J. Katt
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william.katt@wilsonelser.com
mark.severino@wilsonelser.com

**INFORMED CONSENT AND AUTHORIZATION FOR
RELEASE OF CONFIDENTIAL INFORMATION**

PATIENT NAME: DANIEL MCGRAW

DATE OF BIRTH:

SOCIAL SECURITY NO.: ____-____-____

CASE NUMBER: 15-CV-1424-WCG

TO:

I, Daniel McGraw, the undersigned, hereby authorize and direct you to furnish the law firm of Wilson, Elser, Moskowitz, Edelman & Dicker, LLP, permission to examine and/or obtain photo static copies of any and all information requested regarding my past or present physical condition and treatment rendered. The purpose of this authorization is to allow them, or any physician appointed by them, to examine and copy any and all records of any kind and sort in your possession, including but not limited to transcripts, reports, records, billing records, writings and inquiries whether academic, medical, psychiatric, psychological, x-rays or other images (i.e., CT Scans, MRI, pathology slides/blocks etc.).

It is my intention by this Authorization to comply with Wis. Stats. Sections 51.30, 146.025, 146.81, 146.82, 146.83, 252.15, 804.10, 45 C.F.R. Parts 160 & 164 and any other applicable statutes requiring my full and informed consent for otherwise privileged information. I further understand that the specific type of information to be disclosed may include, if applicable diagnosis, procedure and treatment for physical, behavioral or psychiatric illness, transmitted diseases, acquired immunodeficiency syndrome (AIDS), or human immunodeficiency virus (HIV), dental records, developmental disease, cerebral palsy, mental retardation, epilepsy, autism, and seizures. This authorization is also valid for the release of employment, scholastic and any other confidential records in your possession.

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A photocopy of this authorization shall be as valid and acceptable as the original and applies to past and future records. This authorization must be used within one year after the date hereof. I understand I may refuse to sign this authorization. By signing this authorization, I understand that there is a potential of re-disclosure of protected health information and that my records will no longer be protected under the federal privacy rule and may be further used or released by persons or organizations receiving it without obtaining my authorization. I also understand that treatment, payment, enrollment or eligibility of benefits may not be conditioned on my signing this authorization. I understand I have a right to inspect or copy all records received. I also understand I have a right to request a copy of this authorization.

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Dated at _____, this ____ day of _____, 2016.
(City and state)

**INFORMED CONSENT AND AUTHORIZATION FOR
RELEASE OF CONFIDENTIAL INFORMATION**

PATIENT NAME: DANIEL MCGRAW

DATE OF BIRTH:

SOCIAL SECURITY NO.: ____ - ____ - ____

CASE NUMBER: 15-CV-1424-WCG

TO:

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220633v.1

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**TO: Ms. Connie Toby, FOIA Coordinator
FAA Civil Aerospace Medical Institute
Office of Aerospace Medicine, AAM-6
P.O. Box 25082
Oklahoma City, OK 73125**

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